CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

Date Received
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Please type or print in ink.

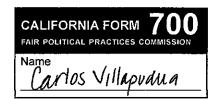
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NAME OF FILER	(LAST)	(FIRST)	REGISTRAR OF MOFERS
	VILLAPUDUA	CARLOS	
1. Office, Agen	cy, or Court		- OEPITY
Agency Name San Jo Division, Board, D	paquin County Board Department, District, if applicable	of Supervisors	2011 HAR
Distric	• • • • • • • • • • • • • • • • • • • •	Board r.	nember & Ser
► If filing for mult	tiple positions, list below or on an attachment.		の ま 等が影
Agency:		Position:	
2. Jurisdiction	of Office (Check at least one box)		Č x
☐ State		☐ Judge (Statewide C	Jurisdiction)
☐ Multi-County _		[X] County of <u>Sal</u>	n Joaquin
City of		Other	
3. Type of Stat	ement (Check at least one box)		
Annual: The 2010.	e period covered is January 1, 2010, through Dece -or-	ember 31, Leaving Office: (Check one)	Date Left
The period 2010.	d covered is/, through Dece	ember 31, O The period coverage leaving office.	vered is January 1, 2010, through the date of
Assuming O	ffice: Date/	 The period covor of leaving office 	vered is/, through the date se.
Candidate:	Election Year Office sou	ght, if different than Part 1:	
4. Schedule Su	mmary		
Check applicable	e schedules or "None."	► Total number of pages inc	luding this cover page:
	- Investments - schedule attached	Schedule C - Income, L	.oans, & Business Positions – schedule attached
.' ^	2 - Investments - schedule attached	Schedule D - Income -	
Schedule B -	Real Property – schedule attached	Schedule E - Income -	Gifts - Travel Payments - schedule attached
	-or- ☐ None - No reporta	ble interests on any schedule	
5. Verification		<u> </u>	
, voimounon			
Date Signed	3-8-11 (month, day, year)	Signatu	
	powies, soy, year		

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

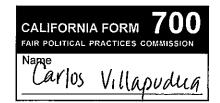
Do not attach brokerage or financial statements.



NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE \$2,000 - \$10,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 NATURE OF INVESTMENT Stock Other (Describe) Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
NAME OF BUSINESS ENTITY O O GENERAL DESCRIPTION OF BUSINESS ACTIVITY	► NAME OF BUSINESS ENTITY
FAIR MARKET VALUE \$2,000 - \$10,000	FAIR MARKET VALUE \$2,000 - \$10,000
IF APPLICABLE, LIST DATE: /	IF APPLICABLE, LIST DATE:
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY N A
FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 NATURE OF INVESTMENT Stock Other (Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000 NATURE OF INVESTMENT Stock Other (Describe) Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
Comments	

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts

(Ownership Interest is 10% or Greater)



FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

▶ 1. BUSINESS ENTITY OR TRUST	▶ 1. BUSINESS ENTITY OR TRUST
Cilantro Group	N/A
P.O. Box 1282 Stockton, CA 95201	Name
Address (Business Address Acceptable)	Address (Business Address Acceptable)
Check one Trust, go to 2 Business Entity, complete the box, then go to 2	Check one Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF BUSINESS ACTIVITY MEXICAN-American Restaurant	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$1,000,000 \$100,001 - \$1,000,000 Over \$1,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Sole Proprietorship Partnership A Corporation YOUR BUSINESS POSITION President Other	NATURE OF INVESTMENT Sole Proprietorship Partnership Other YOUR BUSINESS POSITION
► 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)	▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
X \$0 - \$499	\$0 - \$499 \$10,001 - \$100,000 OVER \$100,000 OVER \$100,000
➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary)	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)
► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD <u>BY</u> THE BUSINESS ENTITY OR TRUST	▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD <u>BY</u> THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
INVESTMENT	☐ INVESTMENT ☐ REAL PROPERTY
Name of Business Entity or Street Address or Assessor's Parcel Number of Real Property	Name of Business Entity or Street Address or Assessor's Parcel Number of Real Property
Mexican-American Restaurant	Description of Rusiness Activity or
Description of Business Activity or City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Leasehold	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2010/2011) Sch. A-2

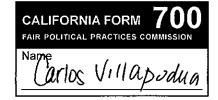
SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM 70 FAIR POLITICAL PRACTICES COMMISSION Name Carlos VIII apudua

STREET ADDRESS OR PRECISE LOCATION 1260 W. Vine St.	STREET ADDRESS OR PRECISE LOCATION
СІТУ	CITY
Stockton, CA 9520	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000
NATURE OF INTEREST	NATURE OF INTEREST
Ownership/Deed of Trust	Ownership/Deed of Trust Easement
Leasehold Description Other	Leasehold Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000	S0 - \$499 S500 - \$1,000 S1,001 - \$10,000
S10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
	lending institutions made in the lender's regular course lic without regard to your official status. Personal loans business must be disclosed as follows:
NAME OF LENDER* Bank of America	NAME OF LENDER*
ADDRESS (Business Address Acceptable) P. U. Box 515503 Los Angeles, CA	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF LENDER J 900SF-6809	BUSINESS ACTIVITY, IF ANY, OF LENDER
INTEREST RATE TERM (Months/Years). 6.25 None 30 yr. 17xed	INTEREST RATE TERM (Months/Years) None
HIGHEST BALANCE DURING REPORTING PERIOD	HIGHEST BALANCE DURING REPORTING PERIOD
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
\$10,001 - \$100,000 X OVER \$100,000	S10,001 - \$100,000 OVER \$100,000
Guarantor, if applicable	☐ Guarantor, if applicable
Comments: Mortgage Company	<u> </u>

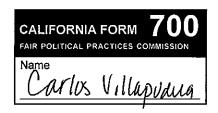
SCHEDULE C Income, Loans, & Business Positions

(Other than Gifts and Travel Payments)



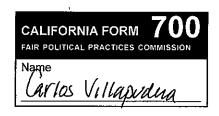
▶ 1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
Winners	n/a
ADDRESS (Business Address Acceptable) Stockton, CA 95206	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED
\$500 - \$1,000 \$1,001 - \$10,000	☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
\$10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Salary Spouse's or registered domestic partner's income	Salary Spouse's or registered domestic partner's income
Loan repayment Partnership	Loan repayment Partnership
Sale of(Property, car, boat, etc.)	Sale of(Property, car, boat, etc.)
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
Other Winnings (Describe)	Other (Describe)
➤ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PER	I OD
of a retail installment or credit card transaction, made	your official status. Personal loans and loans received
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
ADDRESS (Business Address Acceptable)	%
ABBITEOU (Basilioss Paulioss Pioceptable)	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence
	Real Property
HIGHEST BALANCE DURING REPORTING PERIOD	Street address
<u>\$500 - \$1,000</u>	City
S1,001 - \$10,000	
S10,001 - \$100,000	Guarantor
OVER \$100,000	Other
	(Describe)
Comments:	

SCHEDULE D Income - Gifts



J S J S J S J S J J		
ADDRESS (Business Address Acceptable) DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) DISINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) NAME OF SOURCE DATE (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)		NAME OF SOURCE
BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) Db, _ID & UDB		
BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) DBJID & D	D	ADDRESS (Business Address Acceptable)
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)		BUSINESS ACTIVITY, IF ANY, OF SOURCE
Dbj/ID \$		
S	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
	06, 10 :623.00 winnings	
	J	
NAME OF SOURCE ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) —// \$	/	/
ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)		
BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	NAME OF SOURCE	► NAME OF SOURCE
BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	ADDDESO (During Adding	ADDRESS (Durleys Address Assertable)
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) //	ADDRESS [Business Address Acceptable)	ADDRESS (dusiness Address Acceptable)
\$	BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
	/ / e	
		//_ \$
► NAME OF SOURCE	NAME OF SOURCE	► NAME OF SOURCE
ADDRESS (Business Address Association)	ADDRESS (D. J. Address A. Address	ADDRESS (Durings Address Agentatic)
ADDRESS (Business Address Acceptable) ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
		//_
		//_
	N	
Comments:	omments:	

SCHEDULE E Income – Gifts Travel Payments, Advances, and Reimbursements



- · Reminder you must mark the gift or income box.
- · You are not required to report income from government agencies.
- You may mark the box 501(c)(3) for a travel payment received from a nonprofit 501(c)(3) organization. When the payment is a gift it is reportable but is not subject to the \$420 gift limit.

NAME OF SOURCE	► NAME OF SOURCE
ADDRESS (Business Address Accentable)	ADDRESS (Business Address Acceptable)
CITY AND STATE	CITY AND STATE
BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)	BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)
DATE(S): / AMT: \$	DATE(S):/
TYPE OF PAYMENT: (must check one) Gift Income	TYPE OF PAYMENT: (must check one)
DESCRIPTION:,	DESCRIPTION:
·	
NAME OF SOURCE	► NAME OF SOURCE
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
CITY AND STATE	CITY AND STATE
BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)	BUSINESS ACTIVITY, IF ANY, OF SOURCE 501 (c)(3)
DATE(S):// AMT: \$	DATE(S):
TYPE OF PAYMENT: (must check one) Gift Income	TYPE OF PAYMENT: (must check one)
DESCRIPTION:	DESCRIPTION:
Comments:	